

**PRINTER RUSH**  
(PTO ASSISTANCE)

Application : <u>10/691988</u>	Examiner : <u>Will</u>	GAU : <u>9671</u>
From: <u>MRB</u>	Location: <u>IDC</u> FMF FDC	Date: <u>11/20/04</u>
Tracking #: <u>06022415</u> Week Date: <u>10/11/04</u>		

*1FW(RUT6)*

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>08/26/04</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

**[RUSH] MESSAGE:** \_\_\_\_\_

*In claim pages dated 08/26/04, original claims 6 and 7 both depends from original claim 5 which is cancelled. please advise /correct claim dependency.*

*[Signature]*

**[XRUSH] RESPONSE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INITIALS:** \_\_\_\_\_

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
REV 10/04